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Saaa aumuani ta	***	Complete if Known						
Fees pursuant to the Consolidated Appropriations Act, 2005 (H.R. 4818).				Application Nu	mber 10/6	10/606,538		
FEE TRANSMITTAL				Filing Date	Jun	June 26, 2003		
	For FY	2009		First Named In	ventor And	lers Magnu	sson	
Applicant of	laima amall antitus	OED 4 07	Examiner Nam	e Mel	Melanie Jo Hand			
Applicant claims small entity status. See 37 CFR 1.27				Art Unit	376	3761		
TOTAL AMOUNT OF PAYMENT (\$) 405.00				Attomey Docke	et No. 123	12389-0004001/PD53566US02		
METHOD OF	PAYMENT (chec	k all that appl	y)					
Check Credit Card Money Order None Other (please identify):								
✓ Deposit A	ccount Deposit Ac	count Number:_6	0-1050	Deposit A	ccount Name:	Fish & Ric	hardson	
For the above-identified deposit account, the Director is hereby authorized to: (check all that apply)								
	arge fee(s) indicate						except for the filing fee	
- Ch	arge any additiona	il fee(s) or unde	erpayments of fe	-(-)	it any overpay	•	,	
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FEE CALCUL	ATION						<u> </u>	
1. BASIC FILI	NG, SEARCH, A	ND EXAMINA	ATION FEES					
	FILI	NG FEES Small Entit		CH FEES		TION FEE	-	
Application '	Type Fee (<u>Fee (\$</u>	Small Entity Fee (\$)	Fee (\$)	Small Entity Fee (\$)	Fees Paid (\$)	
Utility	330	165	540	270	220	110		
Design	220	110	100	50	140	70		
Plant	220	110	330	165	170	85		
Reissue	330	165	540	270	650	325	***************************************	
Provisional	220	110	0	0	0	0		
2. EXCESS C							Small Entity	
Fee Descripti	<u>on</u> over 20 (includir	o Daisana)				Fee (\$) 52	Fee (\$) 26	
	endent claim ove	•	Reissues			220	110	
	pendent claims	. 5 (mercomg	reissues			390	195	
				Paid (\$)			Dependent Claims	
	20 or HP =	x			,	Fee (\$)		
-	mber of total claims p	•						
Indep. Claims	Extra (B or HP =		<u>ee (\$) </u>	Paid (\$)		•		
	mber of independent of		greater than 3.					
3. APPLICATION SIZE FEE If the specification and drawings exceed 100 sheets of paper (excluding electronically filed sequence or computer								
							or each additional 50	
	fraction thereof.					an cinny) i	or each additional 30	
Total Shee	ts Extra	<u>Sheets</u>	Number of eac	h additional 50 d	or fraction th	ereof Fe	ee (\$) Fee Paid (\$)	
	100 =	/ 50 =		_ (round up to a	whole number	r) ×	=	
4. OTHER FEE	(S) h Specification,	\$120 foo (n.	o cmall antitu	dicacumt)	•		Fees Paid (
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UBMITTED BY				Oi-ti				
ignature	/Kirk Dorius/			Registration No. (Attomey/Agent)	54,073	Teleph	none 512-472-5070	
lame (Print/Type)	Kirk Dorius				·········	Date	12/18/2008	

This collection of information is required by 37 CFR 1.136. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 30 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

Name (Print/Type) Kirk Dorius